

Application Data Sheet

Application Information

Application number::
Filing Date:: 11/05/01
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?:
Computer Readable Form (CRF)?:
Number of copies of CRF::
Title:: Transaction Coordination Including Time
Contracts
Attorney Docket Number:: 003797.00215
Request for Early Publication?: NO
Request for Non-Publication?: NO
Suggested Drawing Figure::
Total Drawing Sheets:: 5
Small Entity?: NO
Latin name::
Variety denomination name::
Petition included?: NO
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?: NO

10007060 40604

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.A.
Status:: Full Capacity
Given Name:: Luis
Middle Name:: F.
Family Name:: Cabrera
Name Suffix::
City of Residence:: Bellevue
State or Province of Residence:: Iowa
Country of Residence:: U.S.A.
Street of mailing address:: P.O. Box 4168
City of mailing address:: Bellevue
State or Province of mailing address:: Iowa
Country of mailing address:: U.S.A.
Postal or Zip Code of mailing address:: 98009-4168

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.A.
Status:: Full Capacity
Given Name:: Alexander
Middle Name:: T.
Family Name:: Weinert
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: Washington
Country of Residence:: U.S.A.
Street of mailing address:: 6702 20th Avenue NW
City of mailing address:: Seattle

State or Province of mailing address:: Washington
Country of mailing address:: U.S.A.
Postal or Zip Code of mailing address:: 98117

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number:: 28319

Representative Information

Representative Customer Number:: 28319

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application		Attorney Docket No. MS 188903.1	10/16/01

